FORM D

UNITED : ||||
SECURITIES AND EXCE

02045494

Washington, D.c. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

117738
OMB APPROVAL
OMB Number:
Expires:
Estimated average burden
hours per response

SEC USE ONLY							
Prefix	Serial						
DATE	RECEIVED						
	1						

Name of Offering (☑ check if this is an amendment and LP to Heitman Realty Investors LP	d name has changed, and indicate change.) Name of	changed from Heitman/PRA Reality Investors
Filing Under (Check box(es) that apply): ☐ Rule 504	□ Rule 505 ☑ Rule 506 □ Section 4(6) □ ULe	OE 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Type of Filing: ☐ New Filing ☑ Amendment		/ SEP 0 3 2002 //
	A. BASIC IDENTIFICATION DATA	\mathrew \[\lambda_1 \]
1. Enter the information requested about the issuer		185/89
Name of Issuer (☑ check if this is an amendment and to Heitman Realty Investors LP	name has changed, and indicate change.) Name change	anged from Heitman/PRA Realty/Investors LP
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
180 North LaSalle Street, Chicago, IL 60601-2886		(312) 849-4150
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices) same		same
Brief Description of Business		
Real estate investments		
Type of Business Organization		
□ corporation ☑ limited p	artnership, already formed □ other (please specify): limited liability company
☐ business trust ☐ limited p	artnership, to be formed	
	Month Year	PROCESSED
Actual or Estimated Date of Incorporation or Organizat		Estimated SEP 0 6 2002
Jurisdiction of Incorporation or Organization:	(Enter two-letter U.S. Postal Service	
	CN for Canada; FN for other foreign	jurisdiction) ETHOMSON
GENERAL INSTRUCTIONS		FIVANCIAL

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A DACK ADVINION DATE									
A. BASIC IDENTIFICATION DATA									
Enter the information requested for the following:									
 Each promoter of the issuer, if the issuer has been organized within the past five years; 									
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \square Director \square General and/or Managing Partner									
Full Name (Last name first, if individual)									
Heitman Realty Management LLC									
Business or Residence Address (Number and Street, City, State, Zip Code)									
180 North LaSalle Street, Suite 3600, Chicago, IL 60601									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual).									
Newsome, Randall E									
Business or Residence Address (Number and Street, City, State, Zip Code)									
180 North LaSalle Street, Suite 3600, Chicago, IL 60601									
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐ Director ☐ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Smith, Roger E.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
180 North LaSalle Street, Suite 3600, Chicago, IL 60601									
Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☑ Executive Officer □ Director □ General and/or Managing Partner									
Full Name (Last name first, if individual)									
Lynn, Nancy B.									
Business or Residence Address (Number and Street, City, State, Zip Code)									
180 North LaSalle Street, Suite 3600, Chicago, IL 60601									
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \square Director \square General and/or Managing Partner									
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)									

☐ Executive Officer

☐ Director

 $\hfill \square$ General and/or Managing Partner

Check Box(es) that Apply:

Full Name (Last name first, if individual)

☐ Promoter

Business or Residence Address (Number and Street, City, State, Zip Code)

☐ Beneficial Owner

					B. IN	FORMA1	TON ABO	OUT OFFI	ERING					
											_		Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									🗇	\square				
Answer also in Appendix, Column 2, if filing under ULOE														
2. What is the minimum investment that will be accepted from any individual?										\$ <u>500,</u> 0	<u>000</u>			
										Yes	No			
3. Does the offering permit joint ownership of a single unit?														
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
Full Name	e (Last na	me first, if	individua	l)										
Heitman														
			•	r and Stree	•	te, Zip Cod	le)							
				Chicago, I	L 60601									
Name of A	Associate	d Broker o	r Dealer											
Creation 1 or 1	177 1 D	T 1 4 1	tit. C.1	'. 1 T.	1 . 6 !	14 D 1			·· ·					
				ited or Inte								☑ Al	1 States	
(Che	[AL]	[AK-X]		[AR]	(CA-X)		[CT-X]	[DE]	[DC]	[FL-X]	[GA-X]	E AI [HI]	[ID]	
	[IL-X]	[IN-X]	[AZ]	[KS-X]	[KY-X]	-	[ME]	[MD-X]		-	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM-X]		[NC]	[ND]	[OH-X]	[OK]	[OR]	[PA-X.]	
	[RI-X]	[SC-X]	[SD]	[TN-X]	[TX-X]	[UT]	[VT]	[VA]	[WA]	[WV-X]		[WY]	[PR]	
Full Name		me first, if			[22, 24]	[01]		[11-]		[, 1-1	[]	[]	[]	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Business	or Reside	nce Addres	ss (Numbe	r and Stree	t, City, Stat	te, Zip Cod	e)			1,				
Name of A	Associate	d Broker o	r Dealer											
States in V	Which Pe	rson Listed	l Has Solic	ited or Inte	nds to Soli	cit Purchas	ers							
(Che	ck "All S	tates" or cl	heck indiv	idual States	s)							Al	1 States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name	(Last na	me first, if	`individual	1)										
Business	or Reside	nce Addres	ss (Numbe	r and Street	t, City, Stat	e, Zip Cod	e)							
Name of A	Associate	d Broker o	r Dealer		,							·		
States in V	Which Per	rson Listed	Has Solic	ited or Inte	nds to Soli	cit Purchas	sers				·····			
(Check "All States" or check individual States)														
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	

C OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND US	ICE OF DDOCFFD

Debt	Aggregate		mount Already Sold
	Offering Price \$ -0-	, S	-0-
Equity		- <u>3</u> - \$	-0-
□ Common □ Preferred	3 -0-	. 3	
	• •	e	0
Convertible Securities (including warrants)		. <u>\$</u>	-0-
Partnership Interests		<u>\$</u>	-0-
Other (Specify)		<u> </u>	-0-
Total	\$ 100,000,000	<u>\$</u>	-0-
Answer also in Appendix, Column 3, if filing under ULOE.			
Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Aggregate
	Number	_	Dollar Amount
	Investors		of Purchases
Accredited Investors	15	<u>\$</u>	5,675,000
Non-accredited Investors	0-	<u>\$</u>	-0-
Total (for filings under Rule 504 only)	0-	<u>\$</u>	-0-
Answer also in Appendix, Column 4, if filing under ULOE.			
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
Type of offering	Type of	Γ	Dollar Amount
	Security		Sold
Rule 505	N/A	<u>\$</u>	N/A
Regulation A	N/A	<u>\$</u>	N/A
Rules 504	N/A	\$	N/A
Total	N/A	<u>\$</u>	N/A
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		wei	hese expenses re paid for by affiliate of the uer
Transfer Agent's Fees		⊐ <u>\$</u>	-0-
		⊐ <u>\$</u>	-0-
Printing and Engraving Costs		⊐ <u>\$</u>	-0-
Printing and Engraving Costs Legal Fees			
		⊐ <u>\$</u>	-0-
Legal Fees		•	-0-
Legal Fees	C	⊐ <u>\$</u>	

b. Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount of any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer

	purpose is not known, furnish an estimate and check the box tents listed must equal the adjusted gross proceeds to the issuabove.								
			Paymer Office Directo Affilia	ers, rs, &			yments to Others		
Salaries and fees		☑	<u>\$ -0-</u>	· <u> </u>	i	<u>s</u>	-0-		
Purchase of real estate		☑	<u>\$ -0-</u>	· <u> </u>	1	<u>s</u>	-0-		
Purchase, rental or leasing and installation of	machinery and equipment	Ø	<u>\$ -0-</u>	· <u> </u>	7 5	<u>s</u>	-0-		
Construction or leasing of plant buildings and	facilities	abla	<u>\$ -0-</u>	· E	1 5	\$	-0-		
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)				·	Ĭ <u>!</u>	\$	-0-		
Repayment of indebtedness		☑	\$ -0-	· <u>-</u>	1	<u>\$</u>	-0-		
Working capital		Ø	<u>\$ -0-</u>	· <u>F</u>	1 9	<u>\$_</u> _	-0-		
Other (specify): Investments			\$ -0-	· &	ī <u>!</u>	\$10 <u>0</u>	,000,000		
Column Totals		abla	<u>\$ -0-</u>	· 🗹	ī <u>s</u>	<u> </u>	-0-		
Total Payments Listed (column totals added).		Ø \$	100,00	0,0	00_	_			
	D. FEDERAL SIGNATURE						_1,1.1		
	the undersigned duly authorized person. If this notice is filed U.S. Securities and Exchange Commission, upon written resursuant to paragraph (b)(2) of Rule 502.								
Issuer (Print of Type) Signature Date									
Heitman Realty Investors LP	29,	2002							
Name of Signer (Print or Type)	itle of Signer (Print or Type)								

Executive Vice-President

ATTENTION	
Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)	

Randall Newsome